

MacPeds LCC Curriculum

2018-2019

Editors: Drs. Stacey Marjerrison & Andrea Hunter



Faculty:

Each group will be led by a pediatrician and social worker on staff

Dr. Stacey Marjerrison	mariersl@mcmaster.ca
Bethany Sproul	sprowlb@HHSC.CA
Dr. Adam Fleming	afleming@mcmaster.ca
Jane Cassano	cassanoj@HHSC.CA
Dr. Lucy Giglia	gigliam@mcmaster.ca
Carol Ann O'Toole	otoole@HHSC.CA
Dr. Burke Baird	baird@mcmaster.ca
Anna-Marie Pietrantonio	pietrantonio@HHSC.CA

Objectives:

LCC: Longitudinal CanMEDS Curriculum. The Goal of the curriculum will be to learn non-medical expert CanMEDS competencies. Residents will gain exposure to the multi-faceted roles they will be called upon to play in their professional duties. The curriculum will cover the following 6 domains:

1. Communicator:
 - A. Interview skills
 - B. Written communication
 - C. Breaking bad news: end-of-life issues, disclosure of error or adverse event, etc
 - D. Informed consent and capacity assessment
2. Collaborator:
 - A. Effective teams: understanding roles/responsibilities, team dynamics
 - B. Conflict resolution, management and prevention
 - C. Collaboration with community agencies
3. Manager:
 - A. Leadership
 - B. Health care costs/utilization
4. Health Advocate:
 - A. Disease prevention & health promotion
 - B. Social determinants of health
 - C. Patient safety
 - D. Political & patient-level advocacy
5. Scholar:
 - A. Giving and receiving feedback
 - B. Resident as a teacher
 - C. Self-reflection & lifelong learning
6. Professional:
 - A. Bioethical principles and theories
 - B. Physician well being
 - C. Confidentiality and privacy
 - D. Administration of a medical practice

Format:

The curriculum will be an evolving curriculum, to meet the changing needs of the learners. It will consist of pre-preparation, consolidated in one-hour sessions every third Tuesday of the month. Residents will be placed in small groups of 11-12 residents facilitated by two faculty members. The sessions will be prepared by staff members with expertise in the area. In advance of the session, residents will be provided with preparation materials. These may include evidence-based formal papers, but faculty are encouraged to also include informal materials such as videos (i.e. TED Talks), classical literature and personal narrative. Residents will be expected to review, digest and reflect on the material prior to the session. The group sessions will be an opportunity to discuss the residents' perspectives on what they reviewed in an open and judgement-free manner. The faculty are there to facilitate discussion, and ensure that interactions are respectful and balanced – they may not have

content expertise. The vision for LCC is to provide a forum to discuss approaches to some of the more challenging elements of careers in pediatrics with a supportive group of colleagues and mentors.

Attendance:

LCC attendance is mandatory. If a resident anticipates missing an LCC, there must be a valid reason pre-approved by their facilitators. Approval will not be granted lightly. A resident can miss no more than up to 20% of the sessions for legitimate reasons, after which they will be given an incomplete on their evaluation. Attendance and successful completion of the LCC curriculum is a requirement of the program.

Staff attendance: There is two staff members assigned to each group. It is expected that every attempt will be made to have both staff in attendance, however clinical and administrative responsibilities may not allow for that. If both staff cannot attend a session they will recruit another member for the LCC faculty to facilitate their group.

Evaluation:

Evaluation in the LCC will include formative and summative evaluations which are all designed to help the resident achieve medical competence. Formal written evaluations will be completed twice yearly by the Facilitators.

Residents will not be evaluated on the content of their participation, and are encouraged to participate freely and without concern for judgement of their thoughts and beliefs. However, residents will be expected to demonstrate the following:

1. Accountability: Consistently attends tutorial. Is on time for tutorials. Informs people of pending lateness or absence. Is prepared for sessions and able to contribute to group discussions beyond merely “uninformed opinion”.
2. Respectful Listening: During interactions with colleagues, guests and facilitators, able to demonstrate good eye contact, awareness of non-verbal cues. Does not interrupt, allows people to complete thoughts. Encourages others to participate, and openly considers alternate points of view presented.
3. Thoughtful Participation: Arrives prepared, having clearly reviewed the materials. Contributes actively to the discussion. Able to explore the perceptions of others, and consider new insights or understandings.

**Longitudinal CanMEDS Competencies (LCC)
RESIDENT LEARNING EVALUATION**

Student: _____

Facilitators: _____

December

June

Accountability Satisfactory Provisional Satisfactory Unsatisfactory

Respectful Listening Satisfactory Provisional Satisfactory Unsatisfactory

Thoughtful Participation Satisfactory Provisional Satisfactory Unsatisfactory

List 1-2 suggestions for the resident to consider as they progress to independent practice:

Provide specific examples of excellence or concern for this resident, if applicable:

LF Signatures: _____

Groups for LCC 2018-2019

<u>RED</u>	<u>GREEN</u>	<u>PURPLE</u>	<u>YELLOW</u>
Stacey & Bethany	Adam & Jane	Lucy & Carol Ann	Burke & Anna-Marie
Schlorff, Megan	Almatrafi, Omar	De Santis, Diana	Griffiths, Nathana
Abdelhaq, Rawan	Patel, Pinkal	Al-Bandari, Maria	Freibauer, Alexander
Arndt, Emily	Charles, Staffany	Hassan-Ali, Mohammed	Tabiah, Omar
Woodward, Mary	Kaur, Sharandeep	Norlund, Samantha	Selvakumar, Shamini
McConnery, Jason	Zahn, Kristen	Robinson, Cal	Boyo, Oritsemoyowa
D'Alessandro, Michelle	Stoltz, Tasha	McColl, Jeanine	Laupacis, Megan
Brown, Lisa	AlHaddad, Muneera	Aziz, Mohammad	Lue Tam, Sabrina
Kacar, Marija	Landy, Paige	Mungovan, Kal	Al Hashemi, Eiman
Masud, Fahad	Strikwerda, Arend	Tannenbaum, Melanie	Campos, Sarah
Jaafar, Ahmad	Alrowshayed, Mohammed	Wuerth, Rey	Malhi, Ranu
Howson-Jan, Brittany-Ann	Austin-Appleton, Meredith	Bahrabi, Aban	Zorko, David
Inch, Kristin	Kieswetter, Luke	Mackin, Robin	Oyefeso, Oyin
Purser, Matthew	Burdick, Maddie	Klowak, Jennifer	Komsa, Kendra
	Mansoor, Nadia		Fox, Mallory

Rooms for LCC 2018-2019

8-9am

	RED	GREEN	PURPLE	YELLOW
	Stacey & Bethany	Adam & Jane	Lucy & Carol Ann	Burke & Anna-Marie
July 17, 2018	All groups together - MDCL 2232			
Aug. 21, 2018	IJ9A	1K9	4N42	4H1
Sept. 18, 2018	1J9A	1K9	4N42	4H1
Oct. 16, 2018	1J9A	1K9	4N42	4H1
Nov. 20, 2018	1J9A	1K9	4N42	4H1
Dec. 18, 2018	1J9A	1K9	4N42	4H1
Jan. 15, 2019	1J9A	1K9	4N42	4H1
Feb. 19, 2019	1J9A	1K9	4N42	4H1
Mar. 19, 2019	1J9A	1K9	4N42	4H1
Apr. 16, 2019	1J9A	1K9	4N42	4H1
May 21, 2019	1J9A	1K9	4N42	4H1
June 18, 2019	1J9A	1K9	4N42	4H1

Potential Topics for LCC for 2018-2019

We will attempt to balance topics across the CanMEDS roles yearly, with two wellness sessions in the year – one in the summer and one in the winter. There will no longer be a summer break.

Session	Dates	Topics	CanMEDS	Prepared by
1.	July 17, 2018	Welcome	Intro	Chiefs / Dr. Marjerrison
2.	Aug. 21, 2018	Time management & organization	Professional	Dr. Wahi
3.	Sept. 18, 2018	Successful teaching	Teaching	Dr. Ngo
4.	Oct. 16, 2018	Caring for LGBTQIA2 patients	Advocate / Professional	TBD
5.	Nov. 20, 2018	How to communicate with angry parents	Communicator	Jane Cassano
6.	Dec. 18, 2018	What to do when there's been an error	Leader	Dr. Battish
7.	Jan. 15, 2019	RDoC	Wellness	TBD
8.	Feb. 19, 2019	Developing as a patient advocate	Advocate	Dr. Marjerrison
9.	Mar. 19, 2019	ACE & Resilience	Professional	Dr. Marjerrison
10.	Apr. 16, 2019	Mentorship	Leader	TBD
11.	May 21, 2019	Developing successful multidisciplinary teams	Collaborator	TBD
12.	June 18, 2019	Trauma-informed care	Communicator	Dr. Baird and Anna-Marie Pietrantonio

*All topics are tentative and subject to change